

# HAWAII STATE ETHICS COMMISSION

## DISCLOSURE OF FINANCIAL INTERESTS (LONG FORM)

<b>NAME (Last, First, Middle)</b>  SONSON, ALEX MORALES	<b>STATE POSITION HELD: (Dept/Div or Board/Commission)</b>  REPRESENTATIVE <b>TERM OF OFFICE (Begin/End):</b> 11/6/2002/11/2/2004
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**FOR EACH ITEM, EXCEPT ITEM 9, DISCLOSE INTERESTS OF FILER, SPOUSE, AND DEPENDENT CHILDREN.**  
 USE THE ABBREVIATIONS: "F" for filer, "SP" for spouse, "DC" for dependent children, and "JT" for joint interests of the spouse and filer.

### ITEM 1: INCOME FOR SERVICES RENDERED FOR PRECEDING CALENDAR YEAR

List the source (the term "source" also includes any state or other government agencies) and amount of all income of \$1,000 or more received during the preceding calendar year, for services rendered, and the nature of the services rendered.

F,SP,DC,JT	NAME AND ADDRESS OF SOURCE OF INCOME	AMOUNT	SERVICES RENDERED
JT	LAW OFFICE OF ALEX M. SONSON WAIPAHU OFFICE PLAZA 94-210 PUPUKAHI ST. STE. 204 WAIPAHU, HI 96797	E	LEGAL SERVICES

☐ Check here if entry is None

☐ Check here if additional sheets are attached

### ITEM 2: OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES

List the amount and identity of every ownership or beneficial interest held during the disclosure period in any business incorporated, regulated, or licensed to carry on business in the State if the interest has a value of \$5,000 or more or is equal to 10% or more of the ownership of the business.

F,SP,DC,JT	BUSINESS NAME AND ADDRESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE OR NO. OF SHARES
F	LAW OFFICE OF ALEX M. SONSON WAIPAHU OFFICE PLAZA 94-210 PUPUKAHI ST., STE. 204 WAIPAHU, HI 96797	LAW OFFICE	OWNER	100%

☐ Check here if entry is None

☐ Check here if additional sheets are attached

**ITEM 3: TRANSFER OF OWNERSHIP OR BENEFICIAL INTERESTS IN BUSINESSES**

List any ownership or beneficial interests in businesses transferred during the disclosure period and the date of transfer.

F,SP, DC,JT	OWNERSHIP OR BENEFICIAL INTEREST TRANSFERRED DURING THIS DISCLOSURE PERIOD	DATE OF TRANSFER

☒ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 4: CREDITORS**

List the name and address of each creditor to whom the value of \$3,000 or more was owed during the disclosure period and the original amount and amount outstanding (excluding debts arising out of retail transactions or the purchase of consumer goods).

F,SP, DC,JT	NAME OF CREDITOR AND ADDRESS	ORIGINAL AMOUNT OWED	AMOUNT OUTSTANDING
JT	CENTRAL PACIFIC BANK WAIPAHU OFFICE PLAZA 94-210 PUPUKAHI ST., STE. 204 WAIPAHU, HI 96797	H	G
JT	FAIRFIELD ACCEPTANCE CORPORATION 10750 WEST CHARLESTON BLVD. STE. 130 LAS VEGAS, NV 89135	C	C

☐ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 5: OFFICERSHIPS, DIRECTORSHIPS, TRUSTEESHIPS**

List every officership, directorship, trusteeship, or other fiduciary relationship held during the disclosure period in any business or organization, the term of office, and the annual compensation.

F,SP, DC,JT	NAME AND ADDRESS OF BUSINESS	TITLE HELD	TERM OF OFFICE	ANNUAL COMPENSATION

☒ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 6: INTERESTS IN REAL PROPERTY HELD IN THE STATE**

List interests in real property in the State, held during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	STREET ADDRESS	TAX MAP KEY NUMBER	VALUE
JT	94-323 KAHUAWAI ST., WAIPAHU HI 96797	9-4-037-103-0000	G
JT	KONA HAWAIIAN VILLAGE BY THE SEA TIME SHARE 75-5961 ALII DR., KAILUA-KONA HI 96740	(3) 7-5-019-005	C

☐ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 7: INTERESTS IN REAL PROPERTY ACQUIRED**

List interests in real property in the State, acquired during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION PAID	NAME OF PERSON RECEIVING THE CONSIDERATION
JT	KONA BY THE SEA 75-6040 ALII DRIVE, KAILUA-KONA HI 96740	\$9,000.00	FAIRFIELD ACCEPTANCE CORPORATION

☒ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 8: INTERESTS IN REAL PROPERTY TRANSFERRED**

List interests in real property in the State, transferred during the disclosure period, if the interest has a value of \$10,000 or more.

F,SP, DC,JT	TAX MAP KEY NUMBER & STREET ADDRESS	AMOUNT & NATURE OF CONSIDERATION RECEIVED	NAME OF PERSON FURNISHING THE CONSIDERATION

☒ Check here if entry is None ☐ Check here if additional sheets are attached

**ITEM 9: CLIENTS PERSONALLY REPRESENTED BEFORE STATE AGENCIES**

List the names of clients personally represented by you before state agencies, except in ministerial matters, for a fee or compensation during the disclosure period, excluding clients represented before courts.

NAME OF CLIENT	NAME OF STATE AGENCY
SEE ATTACHED LIST ROBERT MADAMBA-FIL AM TERMITE	DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS DEPARTMENT OF AGRICULTURE
<input type="checkbox"/> Check here if entry is None <span style="float: right;"><input type="checkbox"/> Check here if additional sheets are attached</span>	

**ITEM 10: CREDITOR INTERESTS IN INSOLVENT BUSINESSES**

List the amount and identity of every creditor interest in insolvent businesses, held during the disclosure period, if the interest has a value of \$5,000 or more.

F,SP,DC,JT	NAME AND ADDRESS OF BUSINESS	NATURE OF BUSINESS	NATURE OF INTEREST	VALUE
			STATE OF HAWAII STATE ETHICS COMMISSION 04 JUN -1 A6:42 RECEIVED	
<input checked="" type="checkbox"/> Check here if entry is None <span style="float: right;"><input type="checkbox"/> Check here if additional sheets are attached</span>				

**CERTIFICATION:** I hereby certify that the above is a true, correct, and complete statement to the best of my knowledge and belief. If I have a spouse and/or dependent children, I also hereby certify that I have included their interests on this form to the best of my knowledge and belief. I understand that it is a violation of State law, chapter 84, HRS, if information is not disclosed as required by chapter 84, HRS. I further understand that there are statutory penalties for noncompliance.

  
SIGNATURE

5/27/04  
DATE

CLIENTS REPRESENTED BEFORE DEPARTMENT OF LABOR  
AND INDUSTRIAL RELATIONS

1. Marie Lyn Agoo
2. Ephraim Amodo
3. Maximo Amodo
4. Randy Andres
3. Villarin Andres
4. Cory Asuncion
5. Alan Ayala
6. Paulina Baniaga
7. Crispin Bantoy
8. Michael Batungbacal
9. Medardo Briones
10. Demetrio Cabuco
11. Cesar Calo
12. Alfredo Canencia
13. Wilfred Ching
14. Ward Collins
15. Charlie Comstock
16. Manuel Corpuz
17. Arsenia Cubacub
18. Ronald Cuizon
19. Johnny Dakiwas

20. Juanito Daquip
21. Conrado Dela Cruz
22. Trinidad DePeralta
23. Rosemarie Eugenio
24. Mariano Gacusan
25. Nestor Gagarin
26. Orlando Ganir
27. Enos Hinojosa
28. Eric Kaanoi
29. Carlo Laforga
30. Irineo Malacas
31. Abraham Marcelino
32. Nida Martinez
33. Kevin Matsuda
34. Modesto Mendoza
35. Clifford Naeole
36. Elizabeth Nishimoto
37. Jose Ochoa-Tijero
38. Carolee Pacheco
39. Jeanette Paeste
40. Gloria Pascua
41. Jonalyn Pascual
42. Rosario Pascual

43. Shannon Pavo
44. Ana Perrett
45. Rochelle Querubin
46. Alicia Quiray
47. Debra Rabe
48. Evelyn Reconoce
49. Genevieve Rego
50. Juanita Rozmeski
51. Arnel Sildora
52. Patricia Soria
53. Estrella Tomas
54. Rosemelyn Tungpalan
55. Sandra Turk
56. Antonino Udan
57. Julius Udan
58. Ray Ulep
59. Rufina Villanueva
60. Elizabeth Vallesteros
61. Noel Veal
62. Rosita Yadao